PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) 086625-0018

In re Application of Naoyoshi YAMADA	
Application Number 10/596,827 – CNF. 1997	Filed June 26, 2006
For OCTAHYDRONAPHTALENE DERIVATIVE AND MEDICINE	
Art Unit 1625	Examiner Patricia L. MORRIS

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☒ One month (37 CFR 1.17(a)(1)) $ _____

☒ Two months (37 CFR 1.17(a)(2)) $ _____

☒ **Three months (37 CFR 1.17(a)(3))**   **$ 1,110**

☐ Four months (37 CFR 1.17(a)(4)) $ _____

☐ Five months (37 CFR 1.17(a)(5)) $ _____

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: $ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ **The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 500417.**

I am the ☐ applicant/inventor.

    ☐ assignee of record of the entire interest. See 37 CFR 3.71.
        Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

    ☒ **attorney or agent of record. Registration Number: 47,522**

    ☐ attorney or agent under 37 CFR 1.34(a).
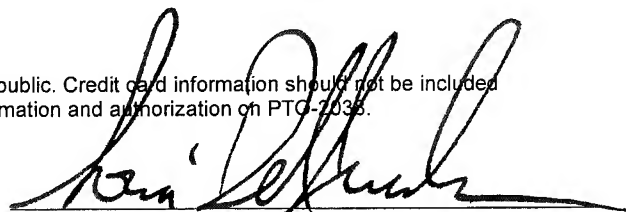   Registration number if acting under 37 CFR 1.34(a)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SEPTEMBER 10, 2010	Signature
Date	
General: (212) 547-5400	LOUIS J. DELJUIDICE
Telephone Number	Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.